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PTO/SB/21 (08-00)

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Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|---|-----------------------------|-------------------------------|---------------------|
| Application Number | 10/580,455 | | |
| | Filing Date | May 24, 2006 | |
| | First Named Inventor | Nigel David TIMMS | |
| | Group Art Unit | To Be Assigned | |
| | Examiner Name | To Be Assigned | |
| Total Number of Pages in This Submission | 9 | Attorney Docket Number | 31229-231165 |

ENCLOSURES (check all that apply)

| | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form (No Fee) | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input checked="" type="checkbox"/> Supplemental Application Data Sheet | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input checked="" type="checkbox"/> Submission of Supplemental Declaration; Supplemental Declaration | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | Remarks | |
| <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

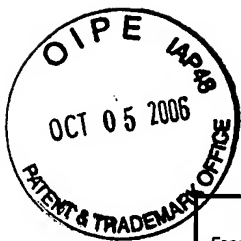
| | | |
|--|---|---|
| Firm or Individual name | Michael A. Sartori, Ph.D. Reg. No. 41,289 | 26694 PATENT TRADEMARK OFFICE |
| Signature | <i>Krista B. Lepping # 54,262 for</i> | |
| Date | October <u>5</u> , 2006 | |

CERTIFICATE OF MAILING

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| I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450b on this date: _____ | | | |
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| Signature | _____ | Date | _____ |

VENABLE
ATTORNEYS AT LAW

SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, 22313-1450.
#790794



PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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| | | | |
|---|--|--------------------------|-------------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006 | | Complete if Known | |
| | | Application Number | 10/580,455 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Filing Date | May 24, 2006 |
| TOTAL AMOUNT OF PAYMENT (\$) | | First Named Inventor | Nigel David TIMMS |
| | | Examiner Name | To Be Assigned |
| | | Art Unit | To Be Assigned |
| | | Attorney Docket No. | 31229-231165 |

| | |
|---|---|
| METHOD OF PAYMENT (check all that apply) | |
| <input type="checkbox"/> Check | <input type="checkbox"/> Credit Card |
| <input type="checkbox"/> Money Order | <input type="checkbox"/> None |
| <input type="checkbox"/> Other (please identify) | |
| <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | |
| <input type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments |

| | | | | | | | |
|---|---------------------|---|--------------------|----------------------|----------------------------------|----------------------|-----------------------|
| FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | |
| | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | |
| | | <u>Small Entity</u> | | <u>Small Entity</u> | | <u>Small Entity</u> | |
| <u>Application Type</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fees Paid (\$)</u> |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |
| 2. EXCESS CLAIM FEES | | | | | | | |
| | | | | | | <u>Small Entity</u> | |
| <u>Fee Description</u> | | | | | | <u>Fee (\$)</u> | <u>Fee (\$)</u> |
| Each claim over 20 (including Reissues) | | | | | | 50 | 25 |
| Each independent claim over 3 (including Reissues) | | | | | | 200 | 100 |
| Multiple dependent claims | | | | | | 360 | 180 |
| <u>Total Claims</u> | | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> | | |
| - 20 = | | x | = | | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | |
| HP = highest number of total claims paid for, if greater than 20. | | | | | | | |
| <u>Indep. Claims</u> | | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | | | |
| - 3 = | | x | = | | | | |
| HP = highest number of total claims paid for, if greater than 3. | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | |
| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | | | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | |
| - 100 = | /50 | (round up to a whole number) x | | | = | | |
| 4. OTHER FEE(S) | | | | | | | |
| <u>Fees Paid (\$)</u> | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): | | | | | | | |

| | | | |
|---------------------|---------------------------|-----------------------------------|-----------------|
| SUBMITTED BY | | | |
| Signature | <i>Michael A. Sartori</i> | Registration No. (Attorney/Agent) | 26,924 |
| Name (Print/Type) | Michael A. Sartori, Ph.D. | Telephone | (202) 344-4000 |
| | | Date | October 5, 2006 |

#790796



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Nigel David TIMMS *et al.*

Appln. No.: 10/580,455

Filed: May 24, 2006

For: IMPROVEMENTS FOR FUEL
COMBUSTION

Art Unit: To Be Assigned

Examiner: To Be Assigned

Atty. Docket No: 31229-231165

Customer No:

26694

PATENT TRADEMARK OFFICE

SUBMISSION OF SUPPLEMENTAL DECLARATION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

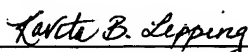
Because the Declaration and Power of Attorney that was filed concurrently with the above-referenced application inadvertently omitted the United Kingdom citizenship of both inventors, Nigel David TIMMS and Baljit SINGH, Applicants submit the attached Supplemental Declaration, which now includes the citizenship of both inventors.

Also being submitted concurrently is a Supplemental Application Data Sheet, which now reflects both the application number and the filing date of the application.

Although it is believed that no fee is required for the submission of the Supplemental Declaration, if a fee is determined to be due, please charge the amount to our Deposit Account No. 22-0261.

Respectfully submitted,

Date: October 5, 2006



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